



03-09-09

JK AF

PTO/SB/21 (08-08)

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

|  |                               |                 |
|--|-------------------------------|-----------------|
| Application Number                       | 10/537,566                    |                 |
| Filing Date                              | November 9, 2005              |                 |
| First Named Inventor                     | Christopher P. Revill, et al. |                 |
| Art Unit                                 | 3616                          |                 |
| Examiner Name                            | Karen J. Amores               |                 |
| Total Number of Pages in This Submission | Attorney Docket Number        | 1316K-000028/NP |

**ENCLOSURES (check all that apply)**

|   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>Return Receipt Postcard</b> |
| <b>Remarks</b><br>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750.  |  |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                                  |          |        |
|--------------|----------------------------------|----------|--------|
| Firm Name    | Harness, Dickey & Pierce, P.L.C. |          |        |
| Signature    |                                  |          |        |
| Printed name | Michael J. Schmidt               |          |        |
| Date         | March 6, 2009                    | Reg. No. | 34,007 |

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

|                       |                    |                        |                              |
|-----------------------|--------------------|------------------------|------------------------------|
| Typed or printed name | Michael J. Schmidt | Express Mail Label No. | EM 184 990 021 US (3/6/2009) |
| Signature             |                    | Date                   | March 6, 2009                |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

14221013.1

EM 184 990 021 US

**FEE TRANSMITTAL  
for FY 2009**

Effective 2/8/2006. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$) 1650**Complete if Known**

|                      |                               |
|----------------------|-------------------------------|
| Application Number   | 10/537,566                    |
| Filing Date          | November 9, 2005              |
| First Named Inventor | Christopher P. Revill, et al. |
| Examiner Name        | Karen J. Amores               |
| Art Unit             | 3616                          |
| Attorney Docket No.  | 1316K-000028/NP               |

**METHOD OF PAYMENT (check all that apply)**
☒ Check   ☐ Credit card   ☐ Money   ☐ Other   ☐ None  
Order
☒ Deposit Account:Deposit  
Account  
Number

08-0750

Deposit  
Account  
Name

Harness, Dickey &amp; Pierce, P.L.C.

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below   ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
**FEE CALCULATION****1. BASIC FILING FEE**

| Large Entity        |          | Small Entity |          | Fee Description        | Fee Paid      |
|---------------------|----------|--------------|----------|------------------------|---------------|
| Fee Code            | Fee (\$) | Fee Code     | Fee (\$) |                        |               |
| 1011                | 330      | 2011         | 165      | Utility filing fee     |               |
| 1012                | 220      | 2012         | 110      | Design filing fee      |               |
| 1013                | 220      | 2013         | 110      | Plant filing fee       |               |
| 1014                | 330      | 2014         | 165      | Reissue filing fee     |               |
| 1005                | 220      | 2005         | 110      | Provisional filing fee |               |
| <b>SUBTOTAL (1)</b> |          |              |          |                        | <b>(\$ 0)</b> |

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

|                    |  |      |   |   |  |   |   |
|--------------------|--|------|---|---|--|---|---|
| Total Claims       |  | ** = | 0 | X |  | = | 0 |
| Independent Claims |  | ** = | 0 | X |  | = | 0 |
| Multiple Dependent |  |      |   |   |  | = | 0 |

| Large Entity |          | Small Entity |          | Fee Description  |
|--------------|----------|--------------|----------|--|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |  |
| 1202         | 52       | 2202         | 26       | Claims in excess of 20                                     |
| 1201         | 220      | 2201         | 110      | Independent claims in excess of 3                          |
| 1203         | 390      | 2203         | 195      | Multiple dependent claim, if not paid                      |
| 1204         | 220      | 2204         | 110      | ** Reissue independent claims over original patent         |
| 1205         | 52       | 2205         | 26       | ** Reissue claims in excess of 20 and over original patent |

**SUBTOTAL (2)** (\$ 0)

\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity   Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description  | Fee Paid |
|----------|----------|----------|----------|--|----------|
| 1051     | 130      | 2051     | 65       | Surcharge - late filing fee or oath  |          |
| 1052     | 50       | 2052     | 25       | Surcharge - late provisional filing fee or cover sheet.                    |          |
| 1053     | 130      | 1053     | 130      | Non-English specification  |          |
| 1812     | 2,520    | 1812     | 2,520    | For filing a request for reexamination                                     |          |
| 1804     | 920*     | 1804     | 920*     | Requesting publication of SIR prior to Examiner action                     |          |
| 1805     | 1,840*   | 1805     | 1,840*   | Requesting publication of SIR after Examiner action                        |          |
| 1251     | 130      | 2251     | 65       | Extension for reply within first month                                     |          |
| 1252     | 490      | 2252     | 245      | Extension for reply within second month                                    |          |
| 1253     | 1,110    | 2253     | 555      | Extension for reply within third month                                     | 1110     |
| 1254     | 1,730    | 2254     | 865      | Extension for reply within fourth month                                    |          |
| 1255     | 2,350    | 2255     | 1,175    | Extension for reply within fifth month                                     |          |
| 1401     | 540      | 2401     | 270      | Notice of Appeal   |          |
| 1402     | 540      | 2402     | 270      | Filing a brief in support of an appeal                                     | 540      |
| 1403     | 1,080    | 2403     | 540      | Request for oral hearing   |          |
| 1452     | 540      | 2452     | 270      | Petition to revive - unavoidable   |          |
| 1453     | 1,620    | 2453     | 810      | Petition to revive - unintentional   |          |
| 1462     | 400      | 1462     | 400      | Petition fee under 37 CFR 1.17(f)  |          |
| 1463     | 200      | 1463     | 200      | Petition fee under 37 CFR 1.17(g)  |          |
| 1464     | 130      | 1464     | 130      | Petition fee under 37 CFR 1.17(h)  |          |
| 1807     | 50       | 1807     | 50       | Processing fee under 37 CFR 1.17 (q)                                       |          |
| 1806     | 180      | 1806     | 180      | Submission of Information Disclosure Stmt                                  |          |
| 8021     | 40       | 8021     | 40       | Recording each patent assignment per property (times number of properties) |          |
| 1809     | 810      | 2809     | 405      | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |
| 1810     | 810      | 2810     | 405      | For each additional invention to be examined (37 CFR § 1.129(b))           |          |
| 1801     | 810      | 2801     | 405      | Request for Continued Examination (RCE)                                    |          |

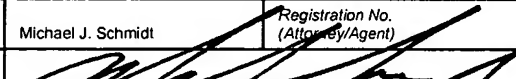
Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid   **SUBTOTAL (3)** (\$ 1650)**4. SEARCH/EXAMINATION FEES**

|      |     |      |     |                         |  |
|------|-----|------|-----|-------------------------|--|
| 1111 | 540 | 2111 | 270 | Utility Search Fee      |  |
| 1112 | 100 | 2112 | 50  | Design Search Fee       |  |
| 1113 | 330 | 2113 | 165 | Plant Search Fee        |  |
| 1114 | 540 | 2114 | 270 | Reissue Search Fee      |  |
| 1311 | 220 | 2311 | 110 | Utility Examination Fee |  |
| 1312 | 140 | 2312 | 70  | Design Examination Fee  |  |
| 1313 | 170 | 2313 | 85  | Plant Examination Fee   |  |
| 1314 | 650 | 2314 | 325 | Reissue Examination Fee |  |

**SUBTOTAL (4)** (\$ 0)**SUBMITTED BY**

Complete (if applicable)

|                   |   |                                   |        |           |                |
|-------------------|---|-----------------------------------|--------|-----------|----------------|
| Name (Print/Type) | Michael J. Schmidt  | Registration No. (Attorney/Agent) | 34,007 | Telephone | (248) 641-1600 |
| Signature         |  |                                   |        | Date      | March 6, 2009  |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.